

Heritage assessment

[Health & Medicine, Nursing](#)



Heritage Assessment is who we are, our history, and where we come from. Heritage means one's background or tradition. Heritage Assessments are unique for each nation; it is a part to the overall nursing assessment. At any time at any place, there are many different groups of people that live in that particular place and all these people have diverse beliefs about health, illness, disease, birth and death, which are directed by their culture.

One's heritage includes information about their cultural beliefs and practices of the family and ethno religious community (Jarvis, C. , 2012). Assessing a patient's heritage enables the nurse to obtain more information about the patient's culture, including beliefs about health and values, and this is important for the nurse in providing patient centered care.

Through the heritage assessment, which is a benefit for nurses in their practice, they are able to evaluate the patient as a whole, their family, including where their ancestors were born, their ethnic background, how many siblings they have, where their family originated from, how often time they spend with family, their religion, their native language, do they speak, write or read with their language, if they prefer keeping company with people of the same value and religion or ethnic background, and what type of food they prefer.

Heritage Assessment tool is a guide to understanding an individual's cultural beliefs, and since cultural competency is important in nursing practice, in order to provide a holistic approach of nursing care the heritage assessment tool has to be utilized to help both the patient and health care provider to understand their culture and know about one's own beliefs and health traditions.

In this paper, the writer will focus on the usefulness of applying a heritage assessment in evaluating the needs of a person as whole, three different families' opinions on health maintenance, health protection, and health restoration. Also this paper will identify health traditions as regard to cultural heritage of the writer, how the three families interviewed in this paper follow their customs and how their traditions and practices are important to them.

The Usefulness of Application of Heritage Assessment The usefulness of Heritage Assessment in evaluating the needs of the whole person are: - Effective care: with the knowledge and application of heritage assessment patients will achieve satisfaction and positive outcomes in health.

Cultural and Linguistic Competence: Applying Heritage Assessment, some behaviors, attitudes, and policies that are seen in a system of multidisciplinary which enable them to work in cross-cultural way to provide quality cares, An example, providing a patient with an interpreter during care in a healthcare facility. “ Under the provisions of Title VI of the Civil Rights Act of 1964, when people with limited English proficiency (LEP) seek health care in health care settings, such as hospitals, nursing homes, clinics, daycare centers, or mental health centers, services cannot be denied to them” Jarvis (2011).

Respectful care: considering the values, preferences, the express needs of the patient are met. Culturally sensitive: With knowledge of Heritage Assessment of a patient as a whole, nurses will be able to develop some constructive attitudes towards the diverse cultural populations in his or her work setting. Culturally Appropriate: The knowledge of the patient's

background using Heritage Assessment tool, the nurse will provide a giving person with the best quality healthcare.

Culturally competent: The nurse will use the body of knowledge to care for the patients as a whole both patient situation, bearing in mind patients immigration status, stress factors, and other social factors, cultural differences and similarities. In the United States the majority of the populations are immigrants, for the nurse to be able to meet the challenge of caring for all these patients from diverse cultural, religious, and ethnic background, she or he must be culturally competent.

This writer after completing a Heritage Assessment learned the usefulness that will help her care for her patients and not only that but also to help her develop cultural competency to know herself and her own cultural beliefs. This writer was born and raised in Nigeria and migrated to United States as an adult. Both parents and Grandparents are from the same country with same cultural beliefs and practices. Both the writer and her husband came from a specific ethnic neighborhood and have the same kind of foods, customs and language, they came from part of the country that believed so much in extended family and family members are encouraged to involve in traditional religions.

Most of her extended family lives in Nigeria and the writer travels every two years to visit them. Due to the fact that the writer was raised in extended family settings, she lived with her grandparents and other extended family members. She maintains close ties and contact with them. The family name has never changed since migrating to U. S. According to culture it is not

permitted to give a child only English names rather the child can have two Igbo names and one English name.

This writer try's to maintain friends from the same religion and ethnic group and communicate mainly with her native language (Igbo) and can read and write comfortably with it. The heritage assessment tool identified this writer from her response as a highly traditional heritage person even though she has adjusted and acculturated into the modern culture, her health practices relevant to her traditional heritage still remain high. Interview of three families

How close the families followed their customs and how important their customs are to them regarding health maintenance, protection and restoration; the interview outcome is shown below. The writer's family (Nigeria), this family believes so much in religion, and believe that God is number one and without him one cannot survive any sickness or illness no matter what type of medical treatment the patient received. They believe that one can maintain good health by believing and trusting in God, and keeping personal and bodily hygiene, eaten balanced diets.

They also believe that some incurable disease is a sort of punishment from doing bad or committing sin and due to the sinful behavior of the individual, no treatment can be effective. They believe in childhood immunization and vaccination for prevention of disease, they pray often and consult pastors and clergy for special prayers and seek for medical help as the last resort when sickness persists, they believe in keeping faith.

The Caucasian American stated that taking vitamins for health issues , eating healthy foods, getting enough sleep and attending doctor's visits and routine check-up and proper treatment of diseases and vaccinations, and also praying to god is her belief. She was born in Wisconsin, both her grandparents and parents were born in Wisconsin as well, she is single and has no children, visits her parents yearly. Her view of health maintenance is based on the knowledge provided by science.

The Filipino family interviewed was born in Philippines and immigrated to the United States at the age of 18 years, speak Tagalog as her native language and English as her second language, married with her own children, spouse from the same culture and ethnic group, maintain friends from the same ethnic groups, celebrate cultural holidays and festivals, participate in religious activities and an active member. Maintaining balance and harmony between person and supernatural forces is the concept that influences Filipinos health promotions and preventions (Lipson & Dibble, 2008).

According to Lipson & Dibble (2008), three practices for health promotion and maintenance in the Filipino culture are centered on heating, which maintains temperature balance, flushing, which rids the body of impurities, eating well promotes good health. The Filipino culture does not believe that preventive health promotion is through regular health screenings, physical exams, exercise and balanced diet. Common traditional practice and cultural heritage identified as follows:- Family role in hospital care: It is believed that a sick person in the hospital will recover fast when the family members are around them.

Eye contact practice: It is a mark of respect for a Nigerian to maintain eye contact when talking with an elderly person and not to address the elderly by their names. Reaction to pain: Women are forbidden to yell or shout when given birth because it is a sign of immaturity and laziness. Nigerian nursing mothers are not allowed to leave the house until three months after birth and are not allowed to stop breast feeding until the baby is one year while other foods are introduced at four to five months.